Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

# Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Writ	e the name that is on	Mary	
	your government-issued picture identification (for example, your driver's	First name	First name	
		nse or passport).	Middle name	Middle name
	Bring your picture		Ruane	
	iden	tification to your ting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-5349	

Official Form 101

Debtor 1	Mary Ruane	Case number (if known)	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	210 North St., Apt. 3 Chardon, OH 44024	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Geauga County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Deb	otor 1	Mary Ruane				Case number (if known)	
Par	t 2:	Tell the Court About	our Bankruptcy	Case			
7.	Bank	chapter of the cruptcy Code you are sing to file under			of each, see <i>Notice Required</i> page 1 and check the approp	l by 11 U.S.C. § 342(b) for Individuals Foriate box.	iling for Bankruptcy
	CHOO	sing to me under	Chapter 7				
			☐ Chapter 11				
			☐ Chapter 12				
			☐ Chapter 13				
8.	How	you will pay the fee	about how	you may pay. Typi ur attorney is subn	ically, if you are paying the fe	check with the clerk's office in your local e yourself, you may pay with cash, cas behalf, your attorney may pay with a cr	hier's check, or money
						option, sign and attach the Application	for Individuals to Pay
			☐ I request t	nat my fee be wa		ption only if you are filing for Chapter 7. if your income is less than 150% of the	
			applies to y	our family size an	d you are unable to pay the f	ee in installments). If you choose this op Official Form 103B) and file it with your	otion, you must fill out
9. Have you filed for ■ No.							
		ruptcy within the 3 years?	☐ Yes.				
			Distric	t	When	Case number	
			Distric	t	When	Case number	
			Distric	t	When	Case number	
10.		nny bankruptcy s pending or being	■ No				
	filed not fi you,	by a spouse who is iling this case with or by a business er, or by an	☐ Yes.				
			Debto	r		Relationship to you	
			Distric	t	When	Case number, if know	n
			Debto			Relationship to you	
			Distric	t	When	Case number, if know	n
11.		ou rent your	□ No. Go to	line 12.			
	resid	ence?	■ Yes. Has	your landlord obta	ined an eviction judgment ag	ainst you?	
			_ 103. ■	No. Go to line 1	12.		
				Yes. Fill out <i>Ini</i> bankruptcy peti		ion Judgment Against You (Form 101A	) and file it with this

	Mary Ruane			Case number (if known)
3	Report About Any Bu	sinesses	You Own as a	a Sole Proprietor
0	re you a sole proprietor f any full- or part-time usiness?	■ No.	Go to Part	t 4.
		☐ Yes.	Name and	d location of business
b a s a	sole proprietorship is a usiness you operate as n individual, and is not a eparate legal entity such s a corporation, artnership, or LLC.		Name of b	pusiness, if any
If S	you have more than one ole proprietorship, use a eparate sheet and attach		Number, S	Street, City, State & ZIP Code
	to this petition.		Check the	appropriate box to describe your business:
	·			ealth Care Business (as defined in 11 U.S.C. § 101(27A))
			☐ Sir	ngle Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Sto	ockbroker (as defined in 11 U.S.C. § 101(53A))
			☐ Co	ommodity Broker (as defined in 11 U.S.C. § 101(6))
			☐ No	one of the above
Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?		deadline operation in 11 U.S	s. If you indicans, cash-flow s G.C. 1116(1)(B	Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate that you are a small business debtor, you must attach your most recent balance sheet, statement statement, and federal income tax return or if any of these documents do not exist, follow the procedule).  ling under Chapter 11.
	or a definition of small	■ No.	i aiii iiot iii	illing under Chapter 11.
	usiness debtor, see 11 I.S.C. § 101(51D).	□ No.	I am filing Code.	under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrupt
		☐ Yes.	I am filing	under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Co
4	Report if You Own or	Have Any	/ Hazardous F	Property or Any Property That Needs Immediate Attention
D	o you own or have any	■ No.		
	roperty that poses or is lleged to pose a threat	□ Yes.		
ic	f imminent and lentifiable hazard to ublic health or safety?	inent and W able hazard to	What is the h	nazard?
	or do you own any roperty that needs		If immediate needed, why	attention is v is it needed?
	nmediate attention?			
ir F p li o	for example, do you own erishable goods, or vestock that must be fed, or a building that needs rgent repairs?		Where is the	property?

Debtor 1 Mary Ruane Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

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If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Deb	tor 1 Mary Ruane			Case number	er (if known)				
Part	6: Answer These Quest	ons for Rep	oorting Purposes						
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
		[	☐ No. Go to line 16b.						
		ı	Yes. Go to line 17.						
				usiness debts? Business debts are debts stment or through the operation of the bus	•				
		[	☐ No. Go to line 16c.						
		[	☐ Yes. Go to line 17.						
		16c. S	State the type of debts you or	we that are not consumer debts or busines	ss debts				
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter	7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and administrative expenses	<b>–</b> 163.		Do you estimate that after any exempt propailable to distribute to unsecured creditors	perty is excluded and administrative expenses ?				
	are paid that funds will be available for distribution to unsecured creditors?		⊒ Yes						
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000				
19.	How much do you estimate your assets to be worth?	□ \$100,00	0,000 I - \$100,000 D1 - \$500,000 D1 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
20.	How much do you estimate your liabilities to be?	□ \$100,00	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion				
Part	7: Sign Below								
For	you	I have exar	mined this petition, and I dec	lare under penalty of perjury that the inforr	mation provided is true and correct.				
				, I am aware that I may proceed, if eligible, elief available under each chapter, and I ch					
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out t document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				ot an attorney to help me fill out this					
		I request re	elief in accordance with the c	hapter of title 11, United States Code, spe	cified in this petition.				
			case can result in fines up to	concealing property, or obtaining money co \$250,000, or imprisonment for up to 20 y	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,				
		Mary Rua Signature of	ane	Signature of Debto	or 2				
		Executed of	February 13, 2020 MM / DD / YYYY	Executed on MM	1/DD/YYYY				

Page 6 of 56

Debtor 1	Mary Ruane	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Timothy P Hartory Signature of Attorney for Debtor	Date	February 13, 2020 MM / DD / YYYYY
Timothy P Hartory 0024136 Printed name		
Timothy P. Hartory & Associates Firm name		
8320 Mentor Avenue Mentor, OH 44060-5748 Number, Street, City, State & ZIP Code		
Contact phone (440) 951-6599	Email address	lawoffice@hartory.com
0024136 OH Bar number & State		_

Fill	in this information to identify your cas	e.			
	otor 1 Mary Ruane				
Dox	First Name	Middle Name	Last Name		
1	use if, filing) First Name	Middle Name	Last Name		
Uni	ed States Bankruptcy Court for the: N	ORTHERN DISTRICT	OF OHIO		
Cas	e number				
(if kn		_		_	if this is an
				ameno	ded filing
~·	". '. I F 4000				
	ficial Form 106Sum	d Liabilitiaa ay	ad Cartain Statistical Information		1045
	•		nd Certain Statistical Information e are filing together, both are equally responsible		12/15 a correct
info		irst; then complete tl	he information on this form. If you are filing amen		
		Summary and chec	k the box at the top of this page.		
Par	Summarize Your Assets				
				Your as Value o	ssets If what you own
1.	Schedule A/B: Property (Official Form	106A/B)			
	1a. Copy line 55, Total real estate, from	Schedule A/B		\$	0.00
	1b. Copy line 62, Total personal propert	y, from Schedule A/B.		\$	6,017.84
	1c. Copy line 63, Total of all property on	Schedule A/B		\$	6,017.84
Par	2: Summarize Your Liabilities				
				Your lia	abilities
				Amount	t you owe
2.	Schedule D: Creditors Who Have Claim		/ (Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	0.00
2	,		, ,	<u> </u>	
3.	Schedule E/F: Creditors Who Have Uns 3a. Copy the total claims from Part 1 (p	riority unsecured claim	ns) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (n	onpriority unsecured o	claims) from line 6j of Schedule E/F	\$	42,408.00
			Your total liabilities	s \$	42,408.00
Par					
4.	Schedule I: Your Income (Official Form Copy your combined monthly income from		e I	\$	1,391.76
5.	Schedule J: Your Expenses (Official For Copy your monthly expenses from line 2			\$	1,483.00
Par	4: Answer These Questions for Ad	ministrative and Stat	istical Records		
6.	Are you filing for bankruptcy under C	hapters 7, 11, or 13?			
٥.		• • • •	check this box and submit this form to the court with y	our other sch	nedules.
	Yes				
7.	What kind of debt do you have?				
			debts are those "incurred by an individual primarily fo	r a personal,	family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,959.85

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Bort A on Cabadula E/E capy the following:	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	16,045.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	16,045.00

Debtor 1	Mary Ruane			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT (	OF OHIO	
Case number				☐ Check if this is an
- Case Hamber				amended filing
Official Fo	orm 106A/B			
Schedul	le A/B: Prop	erty		12/15
think it fits best. I	Be as complete and accurate space is needed, attach	ate as possible. If two marrie	nce. If an asset fits in more than one category, d people are filing together, both are equally res n. On the top of any additional pages, write you	sponsible for supplying correct
Part 1: Describe	Each Residence, Buildin	g, Land, or Other Real Estate	You Own or Have an Interest In	
l. Do you own or	have any legal or equitabl	le interest in any residence, b	ouilding, land, or similar property?	
■ No. Go to Pa	rt 2.			
☐ Yes. Where	is the property?			
Part 2: Describe	Your Vehicles			
			nicles, whether they are registered or not? le G: Executory Contracts and Unexpired Lea	
3. Cars, vans, ti	rucks, tractors, sport u	tility vehicles, motorcycle	es	
■ No				
☐ Yes				
			al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories	es
■ No				
☐ Yes				
			ntries from Part 2, including any entries for	
	Your Personal and Hous	sehold Items table interest in any of the	following items?	Current value of the
Do you own or	nave any legal of equi	able interest in any of the	Frontowing items?	portion you own?  Do not deduct secured claims or exemptions.
	oods and furnishings ajor appliances, furniture	e, linens, china, kitchenware	3	
Yes. Desc	cribe			

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

Official Form 106A/B Schedule A/B: Property page 1

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D	ebtor 1	Mary Ruane	Case number (if k	nown)
	☐ Yes.	Describe		
8.	Exampl		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stampons, memorabilia, collectibles	, coin, or baseball card collections;
9.	Exampl	ent for sports ar les: Sports, photo musical instru Describe	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; ca	noes and kayaks; carpentry tools;
			Art supplies	\$100.00
	■ No □ Yes.  Clother Examp	oles: Pistols, rifles  Describe	s, shotguns, ammunition, and related equipment othes, furs, leather coats, designer wear, shoes, accessories	
			Clothes	\$1,000.00
	□ No ■ Yes.	Describe	Costume Jewelry	\$200.00
14	Examp  No Yes.  Any ot  No Yes.	Give specific info	d household items you did not already list, including any health aids you did not	
		scribe Your Finand vn or have any le	cial Assets egal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	□ No		nave in your wallet, in your home, in a safe deposit box, and on hand when you file your	petition
			Cash	\$15.00

Official Form 106A/B Schedule A/B: Property

page 2

De	ebtor 1 Mary I	Ruane		Case number (if known)	
	insti	cking, savings, o		; certificates of deposit; shares in credit unions, brokerage houses, and other the same institution, list each.	· similar
	□ No ■ Yes			Institution name:	
		17.1.	Checking ****6318	CHIME Bank	\$0.00
		17.2.	Savings *****6318	CHIME Bank	\$1.45
		17.3.	Checking and Savings ****5342	Green Dot Bank	\$1.39
18.			cly traded stocks ent accounts with brokera	age firms, money market accounts	
	☐ Yes		Institution or issuer name	e:	
	joint venture  No	ecific information	interests in incorporate about them me of entity:	ed and unincorporated businesses, including an interest in an LLC, part % of ownership:	nership, and
	Negotiable instr	ruments include prinstruments are	personal checks, cashiers those you cannot transfe	le and non-negotiable instruments ' checks, promissory notes, and money orders. r to someone by signing or delivering them.	
21.	Retirement or p  Examples: Inter			), thrift savings accounts, or other pension or profit-sharing plans	
	Yes. List each		tely. of account:	Institution name:	
22.		II unused deposi	ts you have made so that	you may continue service or use from a company c utilities (electric, gas, water), telecommunications companies, or others	
	■ Yes			Institution name or individual:	
		Rent	:	MC3 Properties, LLC	\$450.00
23.	Annuities (A co ■ No	ntract for a perio	dic payment of money to	you, either for life or for a number of years)	
	☐ Yes	Issuer nam	ne and description.		
24.	26 U.S.C. §§ 530			ied ABLE program, or under a qualified state tuition program.	
	■ No □ Yes	Institution i	name and description. Se	parately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, equitab  ■ No	le or future inte	rests in property (other	than anything listed in line 1), and rights or powers exercisable for you	r benefit
	Yes. Give spe	ecific information	about them		

Official Form 106A/B Schedule A/B: Property page 3

D	ebtor 1	Mary Ruane		C	ase number <i>(if known)</i>	
26	Examp	s, copyrights, trademarks, trade	secrets, and other intellectual proites, proceeds from royalties and lice		s	
	■ No □ Yes.	Give specific information about th	em			
27		es, franchises, and other genera les: Building permits, exclusive lic	Il intangibles enses, cooperative association hold	ings, liquor licens	es, professional licenses	
	■ No □ Yes.	Give specific information about th	em			
M	oney or p	property owed to you?				Current value of the
						portion you own? Do not deduct secured claims or exemptions.
28		unds owed to you				
	□ No ■ Yes.	Give specific information about the	em, including whether you already fil	ed the returns and	d the tax years	
			Estimated 2019 Tax Refund		Federal & State	\$750.00
29	. <b>Family</b> Examp		y, spousal support, child support, ma	aintenance, divord	e settlement, property se	ttlement
	■ No					
	☐ Yes.	Give specific information				
30		mounts someone owes you bles: Unpaid wages, disability insur benefits; unpaid loans you ma	rance payments, disability benefits, sade to someone else	sick pay, vacation	pay, workers' compensa	ition, Social Security
	■ No	,				
	☐ Yes.	Give specific information				
31		ts in insurance policies ples: Health, disability, or life insura	ance; health savings account (HSA);	credit, homeowne	er's, or renter's insurance	
		Name the insurance company of e Company na		Beneficiar	r:	Surrender or refund value:
32	If you a	erest in property that is due you are the beneficiary of a living trust, ne has died.	a from someone who has died expect proceeds from a life insuran	ce policy, or are c	urrently entitled to receive	e property because
	■ No □ Yes.	Give specific information				
			Chala lawari			
33			or not you have filed a lawsuit or n tes, insurance claims, or rights to su		or payment	
		Describe each claim				
34	. Other o	ontingent and unliquidated clai	ms of every nature, including cou	nterclaims of the	debtor and rights to se	et off claims
	■ No	D 11 1 1 1 1				
		Describe each claim				
35	. Any fin	ancial assets you did not alread	ly list			
		Give specific information				

Official Form 106A/B Schedule A/B: Property page 4

Deb	otor 1 Mary Ruane		Case number (if known)	
36.	Add the dollar value of all of your entries from P for Part 4. Write that number here		es you have attached	\$1,217.84
Part	Describe Any Business-Related Property You Own	or Have an Interest In. List any real esta	ate in Part 1.	
37. <b>D</b>	Do you own or have any legal or equitable interest in any	business-related property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	t 6: Describe Any Farm- and Commercial Fishing-Relate If you own or have an interest in farmland, list it in Part		st In.	
46. <b>[</b>	Do you own or have any legal or equitable interes	st in any farm- or commercial fishir	g-related property?	
	■ No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Inte	erest in That You Did Not List Above		
	Do you have other property of any kind you did not be Examples: Season tickets, country club membership  No  Yes. Give specific information			
54.	Add the dollar value of all of your entries from P	art 7. Write that number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line	± 15 \$4,800.00		
58.	Part 4: Total financial assets, line 36	\$1,217.84		
59.	Part 5: Total business-related property, line 45	\$0.00		
	Part 6: Total farm- and fishing-related property,	line 52 \$0.00		
61.	Part 7: Total other property not listed, line 54	+\$0.00		
62.	Total personal property. Add lines 56 through 61	\$6,017.84	Copy personal property total	\$6,017.84
63.	Total of all property on Schedule A/B. Add line 58	5 + line 62		\$6,017.84

Official Form 106A/B Schedule A/B: Property page 5

nation to identify your	case:		
Mary Ruane			
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
nkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
			☐ Check if this is an amended filing
	Mary Ruane First Name	First Name Middle Name  First Name Middle Name	Mary Ruane       First Name     Middle Name       Last Name   First Name  Last Name

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1.	Which set of exem	ptions are	you claiming?	Check one only	, even if	your spouse is	filing with	vou.
----	-------------------	------------	---------------	----------------	-----------	----------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.		Specific laws that allow exemption
Living room, kitchen, bedroom furniture Line from Schedule A/B: 6.1	\$3,500.00		\$3,500.00  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Art supplies Line from Schedule A/B: 9.1	\$100.00		\$100.00  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(18)
Clothes Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Costume Jewelry Line from Schedule A/B: 12.1	\$200.00		\$200.00  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
Cash Line from Schedule A/B: 16.1	\$15.00		\$15.00  100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Fill in this infor	mation to identify your	case:		
Debtor 1	Mary Ruane			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if this is an amended filing

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Fill in t	this information to identify y	our case:				
Debtor	1 Mary Ruane					
	First Name	Middle Na	ne	Last Name		
Debtor (Spouse i		Middle Nar		Last Name		
(Spouse i	ii, iiiiig) i iist wanie					
United	States Bankruptcy Court for the	ne: NORTHERN	DISTRICT OF	F OHIO		
Case n	umber					
(if known)	)					Check if this is an
					а	mended filing
Offici	al Form 106E/F					
	edule E/F: Creditors	s Who Have	Insecure	ed Claims		12/15
				ORITY claims and Part 2 for creditors with NO	NPPIOPITY clai	
Schedul	e D: Creditors Who Have Claims ch the Continuation Page to this id case number (if known).	s Secured by Property s page. If you have no	r. If more space information to	G). Do not include any creditors with partially e is needed, copy the Part you need, fill it out o report in a Part, do not file that Part. On the	, number the en	tries in the boxes on the
	any creditors have priority unse					
_	No. Go to Part 2.	our ou oranno aganno	,			
	Yes.					
	165.					
Part 2:	List All of Your NONPRIC	ORITY Unsecured	laims			
3. Do	any creditors have nonpriority ι	unsecured claims aga	inst you?			
	No. You have nothing to report in	this part. Submit this fo	rm to the court v	with your other schedules.		
_	Yes.					
uns	ecured claim, list the creditor sepa n one creditor holds a particular cla	arately for each claim. I	or each claim li	of the creditor who holds each claim. If a cred isted, identify what type of claim it is. Do not list o you have more than three nonpriority unsecured	claims already inc	cluded in Part 1. If more
						Total claim
4.1	Alled Dermatology	ļ	ast 4 digits of	account number		\$258.00
	Nonpriority Creditor's Name		<b>N</b> /h 4 h	daha in suma da		
	PO Box 771922 Detroit, MI 48277	,	vnen was the c	debt incurred?		_
	Number Street City State Zip Cod	de	s of the date y	you file, the claim is: Check all that apply		
	Who incurred the debt? Check	one.				
	Debtor 1 only	I	☐ Contingent			
	Debtor 2 only	I	☐ Unliquidated	I		
	Debtor 1 and Debtor 2 only	I	☐ Disputed			
	☐ At least one of the debtors ar	iu anomei		RIORITY unsecured claim:		
	$\square$ Check if this claim is for a	Community	☐ Student loans			
	debt Is the claim subject to offset?		Obligations a priority	arising out of a separation agreement or divorce	that you did not	
	No			r ciaims nsion or profit-sharing plans, and other similar de	hts	
	■ No □ Yes				~	
	⊔ Yes		Other. Specif	ify Medical		_

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 10

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30135

1 Mary Ruane		Case number (if known)	
Behavioral Wellness Group	Last 4 digits of account number	A325	\$196.00
Nonpriority Creditor's Name 8224 Mentor Ave., Ste 208 Mentor, OH 44060	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
$\square$ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical		
Chardon Smile Dental	Last 4 digits of account number	4062	\$146.00
Nonpriority Creditor's Name 220 Cherry Ave. Chardon, OH 44024	When was the debt incurred?	Opened 04/16	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical		
01		multiple	<b>\$4.040.00</b>
Charter Communications  Nonpriority Creditor's Name	Last 4 digits of account number	Accounts	\$1,312.00
400 Atlantic St., FL 10 Stamford, CT 06901	When was the debt incurred?	Opened 05/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Utility		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 10

Cleveland Skin Pathology Lab	Last 4 digits of account number	0004	\$230.00
Nonpriority Creditor's Name 3737 Park East Dr., #202	When was the debt incurred?	Opened 07/16	Ψ200.0
Beachwood, OH 44122 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	, c aa <b>,</b> c, c	onook all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
Yes	Other. Specify Medical		
Credit Acceptance Corp Nonpriority Creditor's Name	Last 4 digits of account number	7407	\$6,575.00
		Opened 02/16 Last Active	
Po Box 5070 Southfield, MI 48086	When was the debt incurred?	6/19/17	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
ls the claim subject to offset? ■	report as priority claims  Debts to pension or profit-sharir	an plane, and other similar debte	
No No			
Yes	Other. Specify Automobile	<u> </u>	
Crescent Bank And Trus	Last 4 digits of account number	6809	\$5,694.00
Nonpriority Creditor's Name Po Box 2460	When was the debt incurred?	Opened 09/13 Last Active 3/25/16	
Chesapeake, VA 23327  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	із. Спеск ан тас арріу	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharir		
□Yes	■ Other. Specify Automobile	e	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	or 1 Mary Ruane		Case number (if known)	
4.8	Dept Of Ed/navient Nonpriority Creditor's Name	Last 4 digits of account number	0424	\$5,882.00
	Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 04/09 Last Active 12/31/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	ıl	
4.9	Dept Of Ed/navient  Nonpriority Creditor's Name	Last 4 digits of account number	0424	\$5,663.00
	Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 04/09 Last Active 12/31/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	ıl	
4.1 0	Dept Of Ed/navient  Nonpriority Creditor's Name	Last 4 digits of account number	1220	\$4,500.00
	Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 12/10 Last Active 12/31/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	■ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	ıl	

Schedule E/F: Creditors Who Have Unsecured Claims

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Drs Hill & Thomas	Last 4 digits of account number	5747	\$60
Nonpriority Creditor's Name	Last 4 digits of account number		ΨΟΟ
4853 Galaxy Pkwy Ste. I	When was the debt incurred?	Opened 08/14	
Cleveland, OH 44125 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	<u>_</u>		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	l alaim.	
At least one of the debtors and another	Student loans	a claim:	
☐ Check if this claim is for a community debt  Is the claim subject to offset?	<u></u>	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other. Specify Medical	<u> </u>	
Fifth Third Bank		0425	<b>\$70</b>
Nonpriority Creditor's Name	Last 4 digits of account number	8135	\$72
PO Box 630900 Cincinnati, OH 45263	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	i ciaim:	
☐ Check if this claim is for a community debt	Student loans		
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Miscellaneo	ous	
GEICO Choice Co.	Last 4 digits of account number		\$4
Nonpriority Creditor's Name 5260 Western Ave.	When was the debt incurred?		<u> </u>
Chevy Chase, MD 20815			
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	■ Other. Specify Miscellaneo		

Schedule E/F: Creditors Who Have Unsecured Claims

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KeyBank National Asociation	Last 4 digits of account number 5165	\$621.0
Nonpriority Creditor's Name PO Box 94968 Claveland, OH 44404	When was the debt incurred?	
Cleveland, OH 44101  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
$\square$ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Miscellaneous	
Lake Health Physician Group	Last 4 digits of account number 1339	\$469.0
Nonpriority Creditor's Name PO Box 781389 Detroit, MI 48278	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Medical	
Precision Orthopaedic Specialties Nonpriority Creditor's Name	Last 4 digits of account number	\$75.
PO Box 887	When was the debt incurred?	
Chardon, OH 44024-0887  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Check an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Medical	

Schedule E/F: Creditors Who Have Unsecured Claims

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Mary Ruane	Case number (if known)	
SP Geauga, LLC	Last 4 digits of account number	\$3,125.00
Nonpriority Creditor's Name  564 Water St.	When was the debt incurred?	
Chardon, OH 44024  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Miscellaneous	
The Illuminating Company	Last 4 digits of account number 1644	\$2,339.00
Nonpriority Creditor's Name PO Box 3687 Akron, OH 44309	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Utility	
University Hopsital Medical	Last 4 digits of account number multiple	\$1,692.00
Nonpriority Creditor's Name 20800 Harvard Rd. Highland Hills, OH 44122	When was the debt incurred? Opened 06/15	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Medical	

Schedule E/F: Creditors Who Have Unsecured Claims

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4.2	Wellness One of Auburn		¢490.00
0 _	Nonpriority Creditor's Name 11800 E. Washington	Last 4 digits of account number  When was the debt incurred?	\$180.00
	Chagrin Falls, OH 44023	When was the dest incurred:	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
,	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.2	Windstream	Last 4 digits of account number 7529	\$389.00
	Nonpriority Creditor's Name	<del></del>	
	205 S. Hambden St. Chardon, OH 44024	When was the debt incurred? Opened 08/19	
٦	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
,	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utility	
4.2	World Financial Capital Bank	Last 4 digits of account number	\$1,686.00
	Nonpriority Creditor's Name		
	800 TechCenter Dr.	When was the debt incurred?	
_	Gahanna, OH 43239  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. One or all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

Official Form 106 E/F

On which entry in Part 1 or Part 2 did you list the original creditor?

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 10

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Mary Ruane		Case number (if known)
Charlie Patchen & Murphy 366 East Broad St.	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Columbus, OH 43215	Last 4 digits of account number	7407
Name and Address Credit Management Lp 6080 Tennyson Pkwy Plano, TX 75024	On which entry in Part 1 or Part 2 d Line 4.4 of (Check one):  Last 4 digits of account number	id you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Enhanced Recovery Co L PO Box 57547 Jacksonville, FL 32241	On which entry in Part 1 or Part 2 d Line <b>4.4</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	0354
Name and Address First Federal Credit C 24700 Chagrin Blvd Ste 205 Cleveland, OH 44122	On which entry in Part 1 or Part 2 d Line <b>4.11</b> of ( <i>Check one</i> ):  Last 4 digits of account number	id you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address First Federal Credit C 24700 Chagrin Blvd Ste 205 Cleveland, OH 44122	On which entry in Part 1 or Part 2 d Line 4.5 of (Check one):  Last 4 digits of account number	id you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address First Federal Credit C 24700 Chagrin Blvd Ste 205	On which entry in Part 1 or Part 2 d Line <u>4.3</u> of ( <i>Check one</i> ):	id you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Cleveland, OH 44122	Last 4 digits of account number	• •
Name and Address First Federal Credit C 24700 Chagrin Blvd Ste 205 Cleveland, OH 44122	On which entry in Part 1 or Part 2 d Line 4.19 of (Check one):	id you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
0107010110, 011 44122	Last 4 digits of account number	
Name and Address Lawrence J. Powers, Esq. 25550 Chagrin Blvd., Ste. 400 Beachwood, OH 44122	On which entry in Part 1 or Part 2 d Line <b>4.17</b> of ( <i>Check one):</i>	id you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
•	Last 4 digits of account number	
Name and Address Midland Funding 2365 Northside Dr., Ate. 300 San Diego, CA 92108	On which entry in Part 1 or Part 2 d Line <u>4.22</u> of ( <i>Check one</i> ):	id you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Receivables Performance 20816 44th Ave. West Lynnwood, WA 98036	On which entry in Part 1 or Part 2 d Line <u>4.21</u> of ( <i>Check one</i> ):	id you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Part 4: Add the Amounts for Each Type	of Unsecured Claim	
Total the amounts of certain types of unsecure type of unsecured claim.	d claims. This information is for statis	tical reporting purposes only. 28 U.S.C. §159. Add the amounts for each
		Total Claim
6a. Domestic support obliga	ations	6a. \$ <b>0.00</b>

Total claims from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$

Claims for death or personal injury while you were intoxicated

b. \$ 0.00 c. \$ 0.00

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 9 of 10

Debtor 1 Mary Ruane Case number (if known) Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** 6f. Student loans 6f. 16,045.00 Total claims from Part 2 6g. Obligations arising out of a separation agreement or divorce that 0.00 6g. you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 6i. 26,363.00 Total Nonpriority. Add lines 6f through 6i. 42,408.00 6j.

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 10 of 10

Fill in this infor	mation to identify your	case:		
Debtor 1	Mary Ruane			
	First Name	Middle Name	Last Name	I
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number				☐ Check if this is an
				amended filing

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 MC3 Properties, LLC 13620 Mayfield Rd. Chardon, OH 44024 **Apartment Lease** 

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this	information to identify your	case:			
Debtor 1	Mary Ruane				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case numb	per				☐ Check if this is an amended filing
Official	Form 106H				
	ule H: Your Cod	ebtors			12/15
our name	and case number (if known) you have any codebtors? (If	. Answer every question			f any Additional Pages, write
■ No □ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana				tates and territories include
	Go to line 3 Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form 1	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the	rith you. List the person shown creditor on Schedule D (Official hedule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and Z	P Code		Column 2: The credit Check all schedules t	or to whom you owe the debt hat apply:
3.1				☐ Schedule D, line	
	Name			□ Schedule E/F, line	<u> </u>
				☐ Schedule G, line	
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line☐ Schedule G, line☐ Schedule G, line☐	
<del>.</del>	N			— Scriedule G, line	
	Number Street City	State	ZIP Code		

						_				
	in this information		ase:							
Dei	btor 1	Mary Ruane								
	btor 2 buse, if filing)									
Uni	ited States Bankrup	otcy Court for the	: NORTHERN DISTRIC	CT OF OHIO						
(If kr	se number					□ A		ed filing ent showing	g postpetition	
<u>O</u>	fficial Form	<u> 1061</u>				N	1M / DD/ Y	YYY		
S	chedule I:	Your Inc	ome							12/15
spo atta	use. If you are sep ch a separate she	parated and you eet to this form. be Employment	are married and not filii r spouse is not filing wi On the top of any additi	th you, do not inclu	ude informati	on about	t your spo	ouse. If mo	ore space is	needed,
••	information.	ioyille.ii.		Debtor 1			Debtor 2	2 or non-fil	ling spouse	
	If you have more attach a separate		Employment status	■ Employed			☐ Empl	•		
	information abou	1 0		☐ Not employed			☐ Not e	mployed		
	employers.		Occupation	Chiropractic Te	ech					
	Include part-time self-employed wo		Employer's name	Roediger Chiro	pratic					
	Occupation may or homemaker, if		Employer's address	401 South St. Chardon, OH 4	4024					
			How long employed the	nere? <u>1 yr 3</u>	mos		_			
Par	rt 2: Give De	etails About Mor	thly Income							
	mate monthly incuse unless you are		ate you file this form. If y	you have nothing to	report for any	line, write	e \$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing e space, attach a s		ore than one employer, co this form.	embine the information	on for all empl	oyers for	that perso	on on the lir	nes below. If	you need
						For Del	otor 1		otor 2 or ng spouse	
2.			ry, and commissions (becalculate what the month)		2. \$	1	,970.26	\$	N/A	-
3.	Estimate and lis	st monthly overt	ime pay.		3. +\$		0.00	+\$	N/A	-
1	Calculate gross	Income Add lin	00 2 1 lino 2		4 6	1.0	70.26	•	NI/A	

Official Form 106I Schedule I: Your Income page 1

Official Form 106l Schedule I: Your Income page 2

13. Do you expect an increase or decrease within the year after you file this form?

Yes. Explain:

	Lie data in Commencia de Lida effermenta				
FIII	I in this information to identify your case:				
Deb	Mary Ruane Mary Ruane		Che	eck if this is:	
				An amended filing	
	btor 2bouse, if filing)			A supplement show 13 expenses as of	ving postpetition chapter
(Spt	ouse, ir illing)			13 expenses as or	the following date.
Unit	ited States Bankruptcy Court for the: NORTHERN DISTRICT (	OF OHIO		MM / DD / YYYY	
Cas	se number				
(If kı	known)				
Of	Official Form 106J				
Sc	chedule J: Your Expenses				12/15
Ве	e as complete and accurate as possible. If two married programments formation. If more space is needed, attach another shee				r supplying correct
	ımber (if known). Answer every question.	·	•		
Par	art 1: Describe Your Household				
1.	Is this a joint case?				
	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, E	Evnances for Concrete House	achald of Dak	otor 2	
	Tes. Debiol 2 must file Official Form 1003-2, L	Expenses for Separate Flous	seriola di Del	DIOI 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and  Yes. Fill out this information bebtor 2.	-		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes
	•				□ No
					☐ Yes
		-		_	□ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include No				
	expenses of people other than yourself and your dependents?				
	Estimate Your Ongoing Monthly Expenses		<b>.</b>		
exp	stimate your expenses as of your bankruptcy filing date penses as of a date after the bankruptcy is filed. If this in plicable date.				
Inc	clude expenses paid for with non-cash government assi	istance if you know			
	e value of such assistance and have included it on Sche				
(Off	fficial Form 106l.)			Your expe	enses
4.	The rental or home ownership expenses for your resi payments and any rent for the ground or lot.	idence. Include first mortga	ge 4.	\$	450.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	·	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	:	0.00
	<ul><li>4c. Home maintenance, repair, and upkeep expenses</li><li>4d. Homeowner's association or condominium dues</li></ul>		4c. 4d.	\$ \$	25.00 0.00
5.	Additional mortgage payments for your residence, su	uch as home equity loans	4u. 5.		0.00

Debtor 1	Mary Ruane	Case num	ber (if known)	
i. Utili	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	150.00
6b.	Water, sewer, garbage collection	6b.	\$	40.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
6d.	Other. Specify:	6d.	*	
	· · · · · · · · · · · · · · · · · · ·		\$ 	0.00
	d and housekeeping supplies	7.	·	300.00
	Idcare and children's education costs	8.	\$	0.00
	thing, laundry, and dry cleaning	9.	\$	50.00
	sonal care products and services	10.	\$	30.00
	lical and dental expenses	11.	\$	42.00
	nsportation. Include gas, maintenance, bus or train fare.	40	•	100.00
	not include car payments.	12.	·	
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
4. Cha	ritable contributions and religious donations	14.	\$	0.00
ว์. <b>Ins</b> เ	urance.			
	not include insurance deducted from your pay or included in lines 4 or 20.			
15a	. Life insurance	15a.	\$	0.00
15b	. Health insurance	15b.	\$	0.00
15c	. Vehicle insurance	15c.	\$	0.00
15d	. Other insurance. Specify: <b>Dental Insurance</b>	15d.	\$	14.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	cify:	16.	\$	0.00
	allment or lease payments:		· —	
	. Car payments for Vehicle 1	17a.	\$	0.00
	. Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify: Student Loans	17c.	*	82.00
	Other. Specify:	17d.	· ·	0.00
	ir payments of alimony, maintenance, and support that you did not report as		Ψ	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
	cify:	19.	Ψ	0.00
	er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e		our Incomo	
	<ul> <li>Mortgages on other property</li> </ul>	20a.		0.00
	. Real estate taxes	20b.	·	
			·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	. Maintenance, repair, and upkeep expenses	20d.	·	0.00
20e	. Homeowner's association or condominium dues	20e.	\$	0.00
1. <b>O</b> th	er: Specify:	21.	+\$	0.00
0-1				
	culate your monthly expenses			4 400 00
	. Add lines 4 through 21.		\$	1,483.00
226	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c	. Add line 22a and 22b. The result is your monthly expenses.		\$	1,483.00
0-1	and the common and the control of the control			
	culate your monthly net income.	00	•	4 004 =0
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		1,391.76
23b	. Copy your monthly expenses from line 22c above.	23b.	-\$	1,483.00
23c	Subtract your monthly expenses from your monthly income.	220	\$	-91.24
	The result is your monthly net income.	23c.	Ψ	-31.24
For	you expect an increase or decrease in your expenses within the year after your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your iffication to the terms of your mortgage?			e or decrease because of a
	/es. Explain here:			

ebtor 1	Mary Ruane					
	First Name	Middle Name	Last Name			
ebtor 2						
oouse if, filing)	First Name	Middle Name	Last Name			
ited States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO			
ase number						
nown)					☐ Check if this i	is an
ficial Forn	<u>m 106Dec</u>					
eclarat	tion About a	n Individua	I Debtor's Sch	edules		12/1
u must file thi taining mone ars, or both. 1	is form whenever you fi	le bankruptcy schedule	onsible for supplying correc es or amended schedules. M nkruptcy case can result in fi	aking a false statem		
u must file thi taining mone ars, or both. 1	is form whenever you fi y or property by fraud in 18 U.S.C. §§ 152, 1341, 1	le bankruptcy schedulen connection with a bar 519, and 3571.	es or amended schedules. M	aking a false statem ines up to \$250,000,		
u must file thi taining mone ars, or both. 1	is form whenever you fi y or property by fraud in 18 U.S.C. §§ 152, 1341, 1	le bankruptcy schedulen connection with a bar 519, and 3571.	es or amended schedules. Makruptcy case can result in fi	aking a false statem ines up to \$250,000,		
u must file thitaining mone ars, or both. 1  Sig  Did you pa	is form whenever you fi y or property by fraud in 18 U.S.C. §§ 152, 1341, 1	le bankruptcy schedulen connection with a bar 519, and 3571.	es or amended schedules. Makruptcy case can result in fi	aking a false statemines up to \$250,000, kruptcy forms?  Attach Bankru		up to 20
u must file thitaining mone; ars, or both. 1  Sig  Did you pa  No  Yes.	is form whenever you fi y or property by fraud in 18 U.S.C. §§ 152, 1341, 1 In Below  ay or agree to pay some  Name of person	le bankruptcy schedulen connection with a bar 1519, and 3571.	es or amended schedules. Makruptcy case can result in fi	aking a false statemines up to \$250,000,  kruptcy forms?  Attach Bankru Declaration, a	or imprisonment for uptcy Petition Preparer and Signature (Official F	up to 20
u must file thitaining mone; ars, or both. 1  Sig  Did you pa  No  Yes.	is form whenever you fi y or property by fraud it 18 U.S.C. §§ 152, 1341, 1 In Below  ay or agree to pay some  Name of person  alty of perjury, I declare re true and correct.	le bankruptcy schedulen connection with a bar 1519, and 3571.	es or amended schedules. Makruptcy case can result in fi	kruptcy forms?  Attach Bankru Declaration, a	or imprisonment for uptcy Petition Preparer and Signature (Official F	up to 20
u must file thitaining moneyars, or both. 1  Sig  Did you pa  No  Yes.  Under penathat they ar  X /s/ Mai Mary F	is form whenever you fi y or property by fraud in 18 U.S.C. §§ 152, 1341, 1 In Below  Ay or agree to pay some  Name of person  Alty of perjury, I declare the true and correct.  Ty Ruane  Ruane	le bankruptcy schedulen connection with a bar 1519, and 3571.	es or amended schedules. Makruptcy case can result in fi	kruptcy forms?  Attach Bankru Declaration, a	or imprisonment for uptcy Petition Preparer and Signature (Official F	up to 20
Did you pa  No Yes.  Under penathat they ar  X /s/ Mai Mary F	is form whenever you fi y or property by fraud it 18 U.S.C. §§ 152, 1341, 1 In Below  ay or agree to pay some  Name of person  alty of perjury, I declare re true and correct.  ry Ruane	le bankruptcy schedulen connection with a bar 1519, and 3571.	es or amended schedules. Makruptcy case can result in fi	kruptcy forms?  Attach Bankru Declaration, a	or imprisonment for uptcy Petition Preparer and Signature (Official F	up to 20

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Fill	in this infor	nation to identify you	r case:							
Del	btor 1	Mary Ruane								
Dal	btor 2	First Name	Middle Name	Last Name						
	ouse if, filing)	First Name	Middle Name	Last Name						
Uni	ited States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO						
1	se number _					Check if this is an amended filing				
St		of Financial		iduals Filing for E		4/19				
info	rmation. If n		attach a separate sheet to		e equally responsible for su ny additional pages, write yo					
Pai	rt 1: Give I	Details About Your Ma	arital Status and Where Yo	ou Lived Before						
1.	What is your current marital status?									
	☐ Married ■ Not ma									
2.	During the last 3 years, have you lived anywhere other than where you live now?									
	<ul><li>No</li><li>Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li></ul>									
	Debtor 1 P	rior Address:	Dates Debtor lived there	1 Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there				
<b>3.</b> state	Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property tes and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)									
	■ No □ Yes. Ma	ake sure you fill out <i>Sc</i> .	hedule H: Your Codebtors (	Official Form 106H).						
Pai	rt 2 Expla	in the Sources of You	ır Income							
4.	Fill in the tota	al amount of income yo	ou received from all jobs and	ing a business during this y I all businesses, including par ive together, list it only once u		endar years?				
	■ No									
	_	I in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.											
	List each source and the gross income from each source separately. Do not include income that you listed in line 4.											
	■ No											
	_		ill in the de	tails.								
					Debtor 1				Debtor 2			
						of income below.	each	s income from source e deductions and sions)	Sources of inc Describe below.		Gross income (before deductions and exclusions)	
Pa	rt 3:	List	Certain Pa	yments You	Made Befo	ore You Filed fo	r Bankrup	tcy				
6.	Are either Debtor 1's or Debtor 2's debts primarily consumer debts?  No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?  No. Go to line 7.  Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.  Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?  No. Go to line 7.  Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to a attorney for this bankruptcy case.											
	Creditor's Name and Address				Dates of payment		Total amount paid	Amount you still owe	Was this payment for			
7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; co of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support an alimony. No Yes. List all payments to an insider.								al partner; corporatic agent, including one ild support and				
	Inside	er's l	Name and	Address		Dates of payn	nent	Total amount paid	Amount you still owe	Reason for	this payment	
8.	inside Include	er? e pay No	rments on o	-	eed or cosi	cy, did you mak		nents or transfer	any property on ac	count of a d	lebt that benefited a	in
			Name and			Dates of payn	nent	Total amount	Amount you		this payment	
								paid	still owe	Include cred	ditor's name	

Case number (if known)

Official Form 107

Debtor 1 Mary Ruane

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

De	btor 1	Mary Ruane		Case number (	if known)		
Pa	rt 4:	Identify Legal Actions, Repossession	s, and Foreclosures				
9.	List al	n 1 year before you filed for bankrupto Il such matters, including personal injury ications, and contract disputes.					
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>						
	Case	e title e number	Nature of the case	Court or agency	Status o	of the case	
		Geauga, LLC vs Mary Ruane 3 CVF 00004	Civil	Chardon Municipal Cou 111 Water St. Chardon, OH 44024	Pend On a	ppeal	
					Garnis	hment	
	Rua	dit Acceptance Corp vs. Mary ne BCV00040	Civil	Trumbull County Comm Pleas Court 160 High St. Warren, OH 44481	☐ On a	☐ Pending ☐ On appeal ■ Concluded  Garnishment	
	-						
10.	Check	n 1 year before you filed for bankrupto c all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	cy, was any of your prope	erty repossessed, foreclosed,	, garnished, attac	hed, seized, or levied?	
	Cred	litor Name and Address	Describe the Property  Explain what happened	d	Date	Value of the property	
11.	accou	n 90 days before you filed for bankrup unts or refuse to make a payment beca No		luding a bank or financial ins	titution, set off a	ny amounts from your	
		Yes. Fill in the details. litor Name and Address	Describe the action the	e creditor took	Date action wa	s Amount	
12.		n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a		erty in the possession of an a	ssignee for the b	enefit of creditors, a	
	_	No Yes					
Pa	rt 5:	List Certain Gifts and Contributions					
13.	<b>I</b>	n 2 years before you filed for bankrupt No Yes. Fill in the details for each gift.	tcy, did you give any gift	s with a total value of more th	an \$600 per pers	son?	
	Gifts	s with a total value of more than \$600 person	Describe the gifts		Dates you gave the gifts	e Value	
	Pers	on to Whom You Gave the Gift and ress:					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	otor 1 Mary Ruane			Case number (	if known)	
14.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or co			ns with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed		Dates you contributed	Value
Part	t 6: List Certain Losses					
	Within 1 year before you filed for bankrup or gambling?	otcy or	since you filed for bankruptcy, did y	you lose anytl	ning because of thef	t, fire, other disaster,
	■ No					
	Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	the amount that insurance has paid. It ce claims on line 33 of Schedule A/B:	_ist pending	Date of your loss	Value of property lost
_				, ,		
Part	t 7: List Certain Payments or Transfers					
	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or pulnclude any attorneys, bankruptcy petition p	reparin	g a bankruptcy petition?			rty to anyone you
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid		Description and value of any prop	ortv	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not Y	ou	transferred	erty	or transfer was made	payment
	Timothy P. Hartory & Associates 8320 Mentor Avenue Mentor, OH 44060-5748 lawoffice@hartory.com		Attorney Fees		1/2020	\$1,100.00
	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that  No	itors or	to make payments to your creditor		r transfer any propei	rty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankru transferred in the ordinary course of you Include both outright transfers and transfers include gifts and transfers that you have alrest No	r <b>busin</b> made a	ess or financial affairs? as security (such as the granting of a s			
	Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred		iny property or received or debts change	Date transfer was made
	Person's relationship to you					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Mary Ruane Case number (if known)

<ul> <li>19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you beneficiary? (These are often called asset-protection devices.)</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>					of which you are a	
	Name of trust	Description and	value of the pro	perty trans	sferred	Date Transfer was made
Par	List of Certain Financial Accounts, Instru	uments, Safe Depos	it Boxes, and St	orage Unit	ts	
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred?	were any financial a	ccounts or instr	uments he	eld in your name, or for y	our benefit, closed,
	Include checking, savings, money market, or o houses, pension funds, cooperatives, associat  No				t; shares in banks, cred	it unions, brokerage
	Yes. Fill in the details.	ant Aulimita of	Time of second		Data assaumt was	Loot bolones
		ast 4 digits of ecount number	Type of accou	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	r before you filed fo	or bankruptcy, ar	ny safe dep	posit box or other depos	sitory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)	er, Street, City,		the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than you	ır home within 1	year befor	re you filed for bankrupt	cy?
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that some for someone.	one else owns? Inc	lude any proper	ty you bor	rowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surfa	ce water, ground			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	s defined under any		aw, wheth	er you now own, operat	e, or utilize it or used
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		s as a hazardous	waste, ha	zardous substance, tox	ic substance,
Rep	ort all notices, releases, and proceedings that y	rou know about, reç	gardless of when	they occu	urred.	

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Mary Ruane Case number (if known)

24.	Has	s any governmental unit notified you that	t you may be liable or potentially liable	under or in	violation of an environm	ental law?
		No Yes. Fill in the details.				
		ume of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		nmental law, if you t	Date of notice
25.	Hav	ve you notified any governmental unit of	any release of hazardous material?			
		No Yes. Fill in the details.				
		me of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		nmental law, if you t	Date of notice
26.	Hav	ve you been a party in any judicial or adn	ninistrative proceeding under any envi	onmental l	aw? Include settlements	and orders.
		No Yes. Fill in the details.				
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of t	the case	Status of the case
Par	t 11	Give Details About Your Business or	Connections to Any Business			
27.	Wit	hin 4 years before you filed for bankrupt	cy, did you own a business or have an	y of the foll	owing connections to an	y business?
		☐ A sole proprietor or self-employed i	n a trade, profession, or other activity,	either full-ti	ime or part-time	
		☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	p (LLP)		
		☐ A partner in a partnership				
		☐ An officer, director, or managing ex	ecutive of a corporation			
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation			
		No. None of the above applies. Go to F	Part 12.			
		Yes. Check all that apply above and fill	in the details below for each business			
	Ad	isiness Name Idress	Describe the nature of the business		oyer Identification numbe t include Social Security	
	(Nu	imber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates	business existed	
28.		hin 2 years before you filed for bankrupt titutions, creditors, or other parties.	cy, did you give a financial statement t	o anyone al	bout your business? Incl	ude all financial
		No Yes. Fill in the details below.				
	Ad	ime Idress imber, Street, City, State and ZIP Code)	Date Issued			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Mar	y Ruane	Case number (if known)
Part 12: Sign	Below	
are true and cor with a bankrupt	rect. I understand that mak	Financial Affairs and any attachments, and I declare under penalty of perjury that the answers a false statement, concealing property, or obtaining money or property by fraud in connection to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Mary Ruan	ie	
Mary Ruane Signature of De	ebtor 1	Signature of Debtor 2
Date Februa	ry 13, 2020	Date
Did you attach a ■ No □ Yes	additional pages to Your St	ment of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pay or a	agree to pay someone who	not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Fill in this infor	mation to identify your				
	mation to identify your	case:			
Debtor 1	Mary Ruane First Name	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States Ba	ankruptcy Court for the:	NORTHERN DIST	RICT OF OHIO		
Case number if known)					Check if this is an
					amended filing
N(: - : - I = -	100				
Official Fo		n for Indivi	iduals Filing Under Ch	antor 7	4045
lateme	iii oi iiiteiitic	il ioi iliaivi	iduals Filling Officer Cit	apter 1	12/15
	lividual filing under cha	•	out this form if:		
_	ve claims secured by yo				
ou must file th	ever is earlier, unless tl	vithin 30 days after y	of expired.  Tou file your bankruptcy petition or by the time for cause. You must also send copic		
two married p	eople are filing togethe	r in a joint case, botl	h are equally responsible for supplying co	orrect information	on. Both debtors must
	nd date the form.				
	and accurate as possil		needed, attach a separate sheet to this fo	rm. On the top	of any additional pages,
write y	and accurate as possil your name and case nu	mber (if known).	needed, attach a separate sheet to this fo	rm. On the top	of any additional pages,
write y	and accurate as possilyour name and case nu	mber (if known).			
write y Part 1: List Y  For any credit information b	and accurate as possilyour name and case nu Your Creditors Who Have tors that you listed in Pelow.	mber (if known).  The Secured Claims  The Secured Claims  The Secured Claims	Creditors Who Have Claims Secured by F	Property (Officia	al Form 106D), fill in the
write y  Part 1: List Y  For any credit information b	and accurate as possilyour name and case nu Your Creditors Who Have tors that you listed in P	mber (if known).  The Secured Claims  The Secured Claims  The Secured Claims		Property (Officia	al Form 106D), fill in the
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Part 1: List Y For any creditinformation by Identify the creditor's name:  Description of property securing debt  Creditor's name:  Description of property securing debt	and accurate as possilyour name and case nurour Creditors Who Have tors that you listed in Paelow.  The property of the proper	mber (if known).  The Secured Claims  The Secured Claims  The Secured Claims	Creditors Who Have Claims Secured by F What do you intend to do with the propersecures a debt?  Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:  Surrender the property. Retain the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	Property (Official erty that Disaster that D	Il Form 106D), fill in the id you claim the property sexempt on Schedule C? I No I Yes I No I Yes
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Part 1: List Y  For any creditinformation b Identify the cr  Creditor's name:  Description of property securing debt  Creditor's name:  Description of property securing debt  Creditor's name:  Description of property securing debt  Creditor's name:  Description of property securing debt	and accurate as possilyour name and case nure our Creditors Who Have tors that you listed in Pielow.  The property of the property of the control of the property of the control of the property of the control of the c	mber (if known).  The Secured Claims  The Secured Claims  The Secured Claims	Creditors Who Have Claims Secured by F What do you intend to do with the propersecures a debt?  Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:  Surrender the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:  Surrender the property and [explain]:  Surrender the property and redeem it. Retain the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	Property (Official erty that Disaster that D	Il Form 106D), fill in the id you claim the property sexempt on Schedule C? I No I Yes I No I Yes
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Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Best Case Bankruptcy

Debtor 1 Mary Ruane	Case number (#	f known)
name:	☐ Retain the property and redeem it.	☐ Yes
Description of	☐ Retain the property and enter into a	
Description of property	Reaffirmation Agreement. ☐ Retain the property and [explain]:	
securing debt:	Tretain the property and texplain.	
Part 2: List Your Unexpired Personal Property		
in the information below. Do not list real estate le	ou listed in Schedule G: Executory Contracts and Une eases. Unexpired leases are leases that are still in effe y lease if the trustee does not assume it. 11 U.S.C. § 30	ect; the lease period has not yet ended.
Describe your unexpired personal property lease	es	Will the lease be assumed?
Lessor's name:		□ No
Description of leased Property:		
Troperty.		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
		Li res
Lessor's name:		□ No
Description of leased Property:		☐ Yes
, ,		00
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name:		П.
Description of leased		□ No
Property:		☐ Yes
Lessor's name:		□ No
Description of leased		
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
, ,		□ res
Part 3: Sign Below		
Under penalty of perjury, I declare that I have indiproperty that is subject to an unexpired lease.	icated my intention about any property of my estate th	hat secures a debt and any personal
X /s/ Mary Ruane	X	
Mary Ruane	Signature of Debtor 2	
Signature of Debtor 1		

Statement of Intention for Individuals Filing Under Chapter 7

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Best Case Bankruptcy

Fill ir	n this information to identify your case:					y as d	irected in this form and	in Form
Debt	or 1 Mary Ruane			122	2A-1Supp:			
Debt (Spou	or 2 se, if filing)			•	■ 1. There is n	o presi	umption of abuse	
Unite	ed States Bankruptcy Court for the: Northern District of	Ohio			applies w	ill be m	o determine if a presum nade under <i>Chapter 7 I</i> I cial Form 122A-2).	
Case (if kno	e number wn)					`	does not apply now be	oougo of
ľ	·						service but it could ap	
					☐ Check if th	is is a	n amended filing	
Off	icial Form 122A - 1							
Ch	apter 7 Statement of Your Cur	rent	t Mor	nthly Inc	ome			12/19
attach case i	complete and accurate as possible. If two married people at a separate sheet to this form. Include the line number to whomber (if known). If you believe that you are exempted from ying military service, complete and file Statement of Exempted 1:  Calculate Your Current Monthly Income	hich the	e addition sumption	nal information a of abuse becaus	pplies. On the to se you do not ha	p of ar	ny additional pages, write narily consumer debts of	e your name and r because of
1.	What is your marital and filing status? Check one on	ly.						
	Not married. Fill out Column A, lines 2-11.							
	☐ Married and your spouse is filing with you. Fill ou				2-11.			
	Married and your spouse is NOT filing with you.		•	•				
	☐ Living in the same household and are not legal				•			
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are let living apart for reasons that do not include evading	gally s	eparated	l under nonban	kruptcy law tha	t applie	es or that you and your	
10 the	Il in the average monthly income that you received from all s 11(10A). For example, if you are filing on September 15, the 6-months, add the income for all 6 months and divide the total louses own the same rental property, put the income from that pr	onth per by 6. Fil	riod would II in the re	be March 1 throusult. Do not include	igh August 31. If the leany income am	he amo	unt of your monthly incomore than once. For example	e varied during le, if both
					Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and co	mmissio	ons (before all	\$1,959	.85	\$	
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	payme	nts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a spe filled in. Do not include payments you listed on line 3.	Include , your o	e regular depende	contributions nts, parents,	\$ (	0.00	\$	
5.	Net income from operating a business, profession, o	or farm						
		œ.		tor 1				
	Gross receipts (before all deductions)	\$ -\$	0.00					
	Ordinary and necessary operating expenses	· —		Copy here ->	s (	0.00	\$	
6.	Net monthly income from a business, profession, or farm Net income from rental and other real property	пФ			*		Ť	
0.			Deb	tor 1				
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

0.00

page 1

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7. Interest, dividends, and royalties

Debto	Mary Ruane			Case number	(if known)			
				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a benefit of	under					
	For you \$ For your spouse \$	0.00	<u> </u>					
	For your spouse \$		_					
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as stand include any compensation, pension, pay, annuity, ounited States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that process of the exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapter	tated in the next sentencer allowance paid by the y, combat-related injury es. If you received any repay only to the extent that would otherwise be entited.	e, do or etired it it	\$	0.00	\$		
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social Streceived as a victim of a war crime, a crime against hur domestic terrorism; or compensation, pension, pay, and United States Government in connection with a disability disability, or death of a member of the uniformed service sources on a separate page and put the total below.	security Act; payments nanity, or international or nuity, or allowance paid b y, combat-related injury	r by the or					
	·		_	\$	0.00	\$		
			_	\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		<b>.</b>	1,959.85	<b>+</b> \$			1,959.85
Part	2: Determine Whether the Means Test Applies to	o You					incor	ne
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line 1	1		Сору	/ line 11 h	ere=>	\$	1,959.85
	Multiply by 12 (the number of months in a year)						X	12
	12b. The result is your annual income for this part of the	e form				12b.	\$	23,518.20
13.	Calculate the median family income that applies to	you. Follow these steps:						
	Fill in the state in which you live.	ОН						
	Fill in the number of people in your household.	1						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link spe	cified	n the separa	ate instruct	13. ions	\$	50,384.00
14.	How do the lines compare?							
Part	<ul> <li>Line 12b is less than or equal to line 13. Or Go to Part 3. Do NOT fill out or file Official</li> <li>Line 12b is more than line 13. On the top or Go to Part 3 and fill out Form 122A-2.</li> <li>Sign Below</li> </ul>	Form 122A-2.						/22A-2.
	By signing here, I declare under penalty of perjury	that the information on t	his sta	tement and	in any atta	chments is tru	ie and	correct.
	X /s/ Mary Ruane Mary Ruane							
	Signature of Debtor 1  Date February 13, 2020							

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

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Debtor 1	Mary Ruane	Case number (if known)	
	MM/DD/YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Debtor 1 Mary Ruane	Case number (if known)	
---------------------	------------------------	--

### **Current Monthly Income Details for the Debtor**

### **Debtor Income Details:**

Income for the Period 08/01/2019 to 01/31/2020.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Employment** 

Income by Month:

6 Months Ago:	08/2019	\$1,745.64
5 Months Ago:	09/2019	\$1,791.01
4 Months Ago:	10/2019	\$1,576.64
3 Months Ago:	11/2019	\$3,026.06
2 Months Ago:	12/2019	\$1,870.37
Last Month:	01/2020	\$1,749.40
	Average per month:	\$1,959.85

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### United States Bankruptcy Court Northern District of Ohio

In re	Mary Ruane		Case N	lo.	
	-	Debtor(s)	Chapte	r <b>7</b>	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR	DEBTOR(S)	
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for service be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$	1,100.00	
	Prior to the filing of this statement I have received		\$	1,100.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are m	embers and associat	es of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				my law firm. A
5.	In return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspec	ts of the bankrupto	cy case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and render</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of creditor</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to regreaffirmation agreements and application</li> <li>522(f)(2)(A) for avoidance of liens on hou</li> </ul>	ment of affairs and plan which rs and confirmation hearing, a educe to market value; ex ns as needed; preparation	h may be required nd any adjourned emption planni	; hearings thereof; ng; preparation a	nd filing of
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.			inces, relief from	stay actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any pankruptcy proceeding.	agreement or arrangement fo	r payment to me for	or representation of	the debtor(s) in
_F	ebruary 13, 2020	/s/ Timothy P Ha			
1	Date	Timothy P Harto Signature of Attorn Timothy P. Harto 8320 Mentor Ave	<i>ey</i> ory & Associate enue	s	
		Mentor, OH 4406 (440) 951-6599 I		240	
		lawoffice@harto		<u></u>	
		Name of law firm			

## **United States Bankruptcy Court Northern District of Ohio**

In re	Mary Ruane		Case No.			
		Debtor(s)	Chapter	7		
VERIFICATION OF CREDITOR MATRIX						
The ab	ove-named Debtor hereby verifies the	hat the attached list of creditors is true and c	correct to the best	of his/her knowledge.		
Date:	February 13, 2020	/s/ Mary Ruane				
		Mary Ruane				
		Signature of Debtor				

Alled Dermatology PO Box 771922 Detroit, MI 48277

Behavioral Wellness Group 8224 Mentor Ave., Ste 208 Mentor, OH 44060

Chardon Smile Dental 220 Cherry Ave. Chardon, OH 44024

Charlie Patchen & Murphy 366 East Broad St. Columbus, OH 43215

Charter Communications 400 Atlantic St., FL 10 Stamford, CT 06901

Cleveland Skin Pathology Lab 3737 Park East Dr., #202 Beachwood, OH 44122

Credit Acceptance Corp Po Box 5070 Southfield, MI 48086

Credit Management Lp 6080 Tennyson Pkwy Plano, TX 75024

Crescent Bank And Trus Po Box 2460 Chesapeake, VA 23327

Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773

Drs Hill & Thomas 4853 Galaxy Pkwy Ste. I Cleveland, OH 44125 Enhanced Recovery Co L PO Box 57547 Jacksonville, FL 32241

Fifth Third Bank PO Box 630900 Cincinnati, OH 45263

First Federal Credit C 24700 Chagrin Blvd Ste 205 Cleveland, OH 44122

GEICO Choice Co. 5260 Western Ave. Chevy Chase, MD 20815

KeyBank National Asociation PO Box 94968 Cleveland, OH 44101

Lake Health Physician Group PO Box 781389 Detroit, MI 48278

Lawrence J. Powers, Esq. 25550 Chagrin Blvd., Ste. 400 Beachwood, OH 44122

Midland Funding 2365 Northside Dr., Ate. 300 San Diego, CA 92108

Precision Orthopaedic Specialties PO Box 887 Chardon, OH 44024-0887

Receivables Performance 20816 44th Ave. West Lynnwood, WA 98036

SP Geauga, LLC 564 Water St. Chardon, OH 44024 The Illuminating Company PO Box 3687 Akron, OH 44309

University Hopsital Medical 20800 Harvard Rd. Highland Hills, OH 44122

Wellness One of Auburn 11800 E. Washington Chagrin Falls, OH 44023

Windstream 205 S. Hambden St. Chardon, OH 44024

World Financial Capital Bank 800 TechCenter Dr. Gahanna, OH 43239